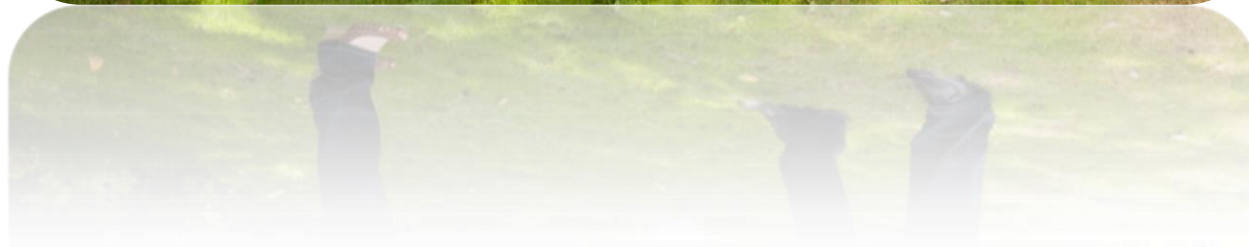# Missouri Home Visiting
CQI Handbook

Continuous Quality Improvement Process for
DHSS Maternal and Child Health Home Visiting

Missouri Department of Health and Senior Services
Revised April 2017

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The Continuous Quality Improvement (CQI) process for Missouri's Home Visiting program is tailored after the Missouri Department of Social Services' CQI model. The Home Visiting Unit at the Missouri Department of Health and Senior Services will work in partnership to lead collaboration between Level 1, Level 2, and Level 3 CQI activities.

CONTINUOUS QUALITY IMPROVEMENT PROCESS (CQI)

CQI is a process by which ALL staff is involved in the evaluation of the effectiveness of services provided to participants in the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) and other home visiting programs administered by the Missouri Department of Health and Senior Services (DHSS). Evaluation involves the examination of the program's individual home visiting models, program procedures, and outcomes; the examination of input from participants, and the examination of relationships and interactions between staff at all levels and with other stakeholders. Principles of the Home Visiting CQI process include:

- CQI allows home visiting programs to engage in reflective practice through examination of site specific activities and performance data to create specific, measurable, attainable, relevant, and timely (SMART) plans for improvement.
- CQI is different from traditional quality assurance in that its focus is self-directed, self-determined change that fosters an environment of reflective practice rather than change imposed by an external entity.
- CQI determines whether services meet predetermined expectations of quality and outcomes as identified through performance measures and outcomes data collected monthly at the agency level through the DHSS web-based data system.
- CQI is an ongoing review of program practices to identify opportunities for improvement.
- CQI is intended to be a process that is:

  - Creative
  - Regular
  - Solution-Focused
  - Empowering
  - Reflective

  - Inclusive
  - Structured
  - Efficient
  - Action-Oriented
  - Creative

- CQI involves stakeholder participation from all levels of LIA staff to state program staff.
- Allocation of resources and staff time at the state and local level is supported by management and through grant funding.
- The CQI process involves multiple levels of team meetings with representation of the former level.
- All CQI meetings and team members are equal in importance.
- The majority of issues are resolved at the level that first identified the issue.
- A continuous feedback loop ensures continuity of the process.

CQI teams are *decision-making teams*. The teams must remain solution focused. CQI team meetings will result in the identification of needs, goals, and available resources, as well as the strengths of the program, the staff, and the participants. Decisions will build on those strengths. Areas needing improvement are identified, discussed, and action plans are developed resulting in solutions for identified needs. Level 1 Teams actively utilize the Plan-Do-Study-Act (PDSA) cycle to develop specific projects based on data to improve program level service delivery.

It is anticipated that the Level 1 CQI Teams will be able to implement solutions for the majority of all issues identified by that team. Issues that are not resolved will be shared with the next level team for possible resolution. Through this process, needs can be met by those most directly affected and by those with the most knowledge about the needs and the solutions. The following graphic represents how issues are resolved through the three levels of CQI.

Figure 1: CQI Issue Resolution

Many issues are resolved in the level in which they are identified. Few will move up to the next level.
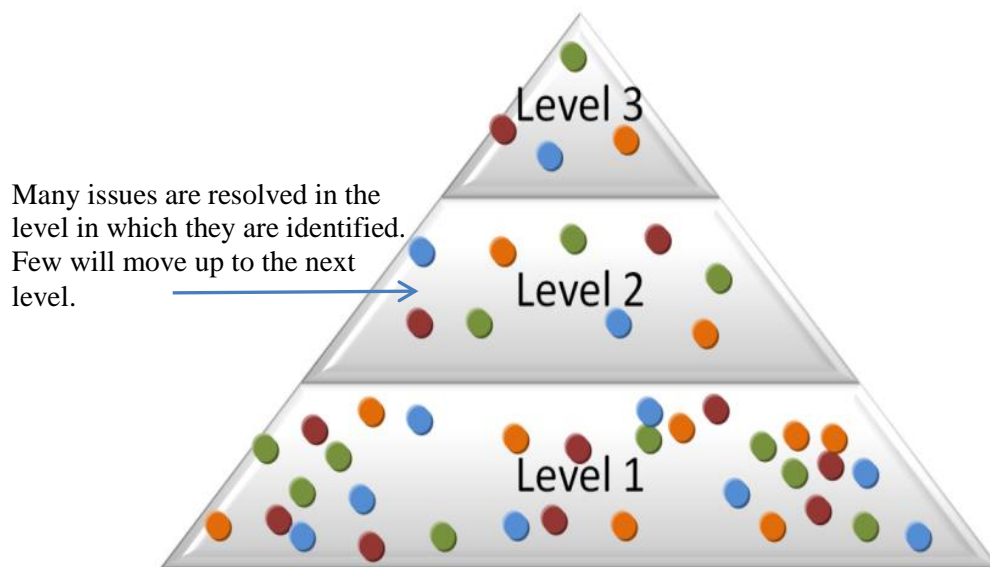
CQI TEAM PARTICIPATION

It is vital to the implementation and success of the CQI process for ALL participants to use their knowledge, vision, and skills. The CQI process involves teams of administrative staff, program staff, community partners, and other stakeholders. Program staff includes all levels of staff, including home visitors, supervisor, program administrators, and support staff. Support staff may include clerical personnel, data entry individuals, and consulting partners who provide day to day assistance and resources to either administrative or service delivery staff or both. Support staff are vital members of CQI teams and should participate as appropriate on the team in which their input can be most beneficial.

The success of the CQI process is dependent upon the degree to which the agency and team members are **committed** to the process. ***All staff associated with a DHSS home visiting program must be a member of a CQI team.*** The expectation is that with input from all stakeholders from the quarterly team meetings will candidly evaluate agency services and outcomes and in turn create and implement plans to improve services. ***CQI meetings are mandatory. They must be scheduled for each level, and are held every quarter.***

Team Descriptions

Team size will vary by level. Level 1 Teams include approximately 3-10 people depending on the size of the LIA. The Level 2 Team format was decided with input from LIAs that led to the development of quarterly calls by model and geographical areas. The Level 2 Team includes one or more LIA representatives. Involvement of program participants and community representatives from each geographical region is encouraged. The Level 3 Team includes DHSS staff, ECCS State Steering Committee representation, and Level 2 representatives. Additional participants may be added to address specific issues as they are identified.

The meetings allow everyone an opportunity for regular input. For ease in coordination, meetings at each level will be held during the same time frame each quarter. According to the recommended CQI calendars (APPENDIX 1.A. and 1. B.), varying levels of CQI meetings will take place every month.

Levels of Teams

There are **three levels of CQI teams** consisting of Level 1 (Program), Level 2 (Community), and Level 3 (State) Teams. The intent of the three-tiered process is to provide the opportunity to evaluate and impact performance and outcomes for the benefit of the participants of DHSS-supported home visiting. The multi-level process allows for solutions to be generated by successive levels of input from a wider perspective of stakeholders at each level. Issues requiring input from succeeding levels are advanced through the three-tiered system. The process includes a series of quarterly meetings with Level 1 meetings occurring in the first month of the quarter followed by Levels 2 and 3 in the subsequent months of the quarter, respectively.   Additionally, the interactive nature of the process promotes commitment to problem solving and feedback from Level 1 to Level 3. The following graphic is a visual representation of the flow of information between the three levels:

Figure 2: CQI Information Flow
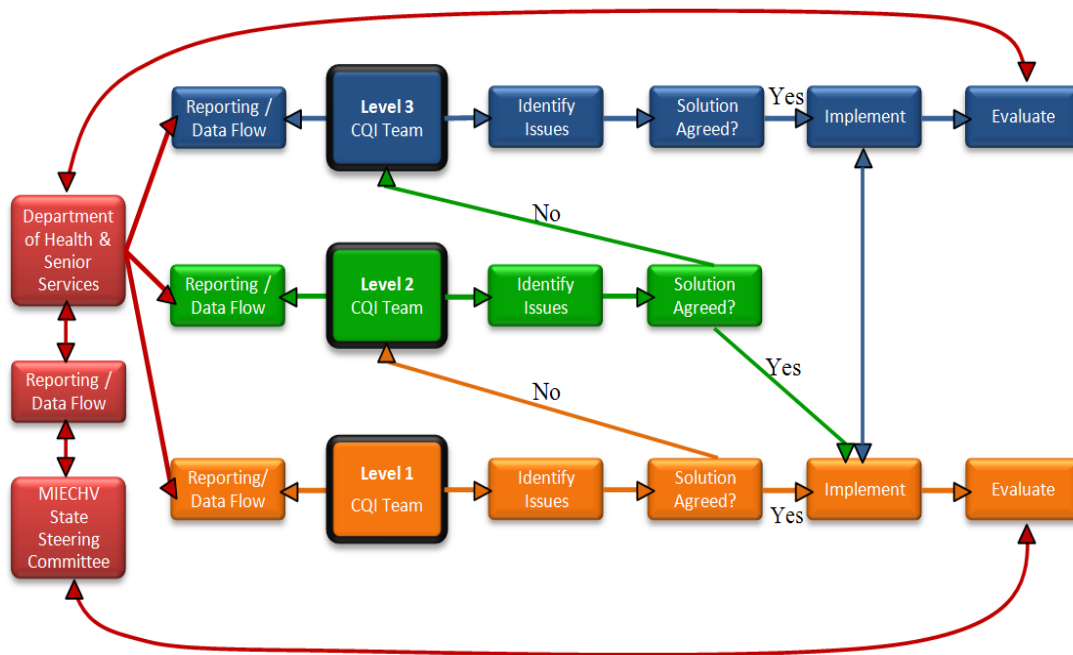
Level 1 Teams (Program)

Level 1 Teams are limited to home visiting agency staff to allow for free-flowing discussion and decision making on program issues. In addition, they may identify policies or issues that impact local operations and require resolution at a succeeding level. The internal nature of the Level 1 Team is intended to avoid external influence from other agencies or community parties.

Level 1 Teams will meet within the two week timeframe designated by DHSS, on the CQI calendar (APPENDIX 1) for each quarter. The meetings may be held in lieu of or in conjunction with a regular staff meeting. A CQI agenda must be used and distinct minutes recorded for the CQI portion of the meeting using the CQI Meeting Activity Log-Minutes (APPENDIX 2). Issues that are discussed by Level 1 Teams, but cannot be resolved, can be sent up to the Level 2 Team.

- **Level 1 Teams:**
  Participants at Level 1 include:
    - Home Visiting Supervisor
    - All Home Visiting Staff
    - Data Entry Staff Member
    - Management Staff Representative (e.g., Program Director)
    - All Support Staff associated with the DHSS home visiting program

Additional participants may be invited to Level 1 meetings, as needed, to provide input on a particular issue.

  Issues to be addressed by Level 1 Teams are:
    - Program level data
    - Newsletter Action Alerts
    - PDSA plan development/review

  Additional potential issues to be addressed by Level 1 Teams may include
    - Program model fidelity
    - Participant and employee satisfaction
    - Quality improvement challenges (e.g., staff retention, participant attrition)
    - Challenges related to:
      - Program evaluation
      - Communication
      - Information systems
      - Hiring
      - Safety

Level 2 Team (Community)

The Level 2 Team provides an opportunity to address issues that impact the home visiting program as a whole and any unresolved issues presented by the leaders of the Level 1 Teams. The Level 2 Team meets within the two-week timeframe, designated by DHSS, on the CQI Calendar (APPENDIX 1) for each quarter. DHSS will utilize resources to provide call-in numbers for Level 2 Team meetings. Issues that are discussed by Level 2 Teams, but cannot be resolved, can be sent up to the Level 3 Team.

- **Level 2 Team:**
  Participants at Level 2 include:
    - Home Visiting Supervisor from each individual Level 1 Team
    - Leader from Level 1 CQI Team or Home Visiting Representative (if Supervisor is Leader), elected by each individual Level 1 Team
    - One participant representative from each Level 2 Team
    - One community representative from each Level 2 Team

Additional participants may be invited to Level 2 meetings, as needed, to provide input on a particular issue.

Possible issues to be addressed by the Level 2 Team are:
- Review PDSA activities developed during Level 1 meetings
- Annual performance measures and outcomes data report
- Unresolved issues brought up from Level 1 Teams
- Model fidelity
- Review and feedback to DHSS on assessment tools, program questionnaires, and implementation of the home visiting program

Level 3 Team (State)

The Level 3 Team provides an opportunity to address statewide issues and consolidate information and issues from all other team levels. Level 3 Team meetings are to be held during the two-week timeframe, designated by DHSS, on the CQI Calendar (APPENDIX 1) for each quarter.

- **Level 3 Team:**
  Participants at Level 3 include:
  - Home Visiting Program Team
    - Project Director
    - Program Coordinator
    - Program Managers
    - Epidemiology Staff
  - Level 2 meeting Representative(s) (elected by the Level 2 Team)
  - ECCS State Steering Committee Representative(s)

  Possible issues to be addressed by the Level 3 Team are:
  - Program data
  - Unresolved issues from Levels 1 and 2
  - Model fidelity
  - Shared successes and resolved issues

Community Partners and Family Participant Membership

In order for the CQI process to truly reflect a complete picture of the service delivery system, community and family participant partners must also be a part of the process. Community partners should be selected based on their ability to assist in the process of generating solutions. Family participants who are familiar with the policy, procedures, and practice of the home visiting program should be selected, when possible, to avoid spending a substantial amount of time orienting them to the agency. The expectation of the CQI process is that community partners and family participants are involved with the Level 2 Team.

Community Partners are individuals with whom the LIAs work in conjunction to provide services. Examples of community partners may include, but are not limited to:

- Foster Parents
- Residential or Counseling Service Providers
- Department of Mental Health
- Family Support Division
- Attorneys
- School Personnel
- Health Care Professionals

- Community or Child Advocates
- Community Partnership Representatives
- Law Enforcement Representatives

Family Participants are identified as adults and/or primary care givers to children involved with the home visiting program. The selection of these participants should be done very carefully with a goal of selecting individuals who have sufficient knowledge of the program to actively participate. It is recognized that many participants will initially have a difficult time interacting in the meetings; therefore, it is suggested that a staff person who knows the individual serve as a coach to assist them in understanding their role. Participants may be either current or past program participants.

Figure 3: CQI Process Organizational Overview

CQI Process Organizational Overview

Quarterly CQI meetings are held at Levels 1, 2, and 3. Level 1 meetings are held at each LIA. All LIA MIECHV staff attends Level 1 meetings to plan, implement, and evaluate activities related to state priority focuses and other unique challenges related to individual LIAs. S.M.A.R.T. Aims are created and changes are tested through the Plan-Do-Study-Act cycle. Unresolved issues are presented at Level 2 meetings to obtain broader perspectives for solutions. Level 3 meetings involve all Missouri MIECHV Program staff as well as representatives from Level 2 meetings and other stakeholders who are likely to contribute to the CQI process.

LEVEL 3 (State) CQI
Home Visiting Program Team:
Project Director
Program Coordinator
Program Managers
Epidemiology Staff

Home Visiting Program Team
Level 2 Representative(s)
ECCS Steering Committee Representative(s)

LEVEL 2 (Local) CQI

Home Visiting Supervisor from Each Level One Team
Level One Team Leader or HV Representative
Community Representative(s) from Level 2 Team Meeting (encouraged)
Participant(s) from Level 2 Team Meeting (encouraged)

Unresolved issues are taken to the next level.

LEVEL 1 (Program) CQI
Home Visiting Supervisor
All Home Visiting Staff
Data Entry Staff
Management Representative
Home Visiting Support Staff

MIECHV LIAs

Delta Area Economic Opportunity Corporation, Malden R-1 School District, PAT National Center, South Central Missouri Community Action Agency, Southeast Missouri Hospital

BUILDING BLOCKS LIAs

Kansas City Health Dept., St. Louis County Health Dept., Southeast Hospital

HFMoHV LIAs

Columbia Boone County Dept. of Health, Cornerstones of Care, Great Circle, Phelps/Maries County Health Dept., Randolph County Health Dept., St. Louis County Dept. of Public Health

CQI TEAM ROLES

Each team, at every level, must have a Scribe, Facilitator, and Leader. Roles generally should rotate each year; however, members within those roles may elect to remain in that role for an additional year. If there are ample team members, alternate individuals should be selected. At the end of the year, the individual in a particular role should assist the new scribe, facilitator, or leader during the first quarter. If the leader cannot attend the next level meeting, a substitute must be designated.

Scribe Role

The scribe participates in the discussion of the meeting and focuses on recording meeting minutes.

DUTIES:
- Maintain the CQI Notebook (see page 13 for information on CQI Notebook)
- Prepare the agenda with the leader and facilitator
- Ensure the team has a place to meet
- Take legible notes
- Capture all of the pieces of the action plan; check with team for accuracy
- Email the CQI Meeting Activity Log-Minutes and meeting minutes to the next level team scribe
- Copy any materials that team members need for the meeting
- Train the next scribe at the end of the CQI cycle

Facilitator Role

The facilitator participates in the meeting and focuses primarily on the process of the meeting and its content.

DUTIES:
- Prepare the agenda with the leader and scribe
- Introduce the agenda to the group with the time parameters
- Pay attention to the time limits on the meeting
- Draw out opinions of quiet members
- Curb run-on members and stifle distractions
- Keep members focused on the task
- Summarize with the scribe the action plan agreed upon by the team
- Train the next facilitator at the end of the CQI cycle
- The facilitator will move into the role of leader at the start of the new CQI cycle

Leader Role

The leader's role is to reinforce the work of the team and to represent the team in the next level of CQI.

DUTIES:
- Provide opening remarks and introductions to the meeting
- Support and reinforce the team for productivity and idea generation

- Ensure that the issues are well understood so they can be presented to the next level meeting
- Read through the CQI Meeting Activity Log-Minutes with the scribe, ensuring clarity
- Assist team members with their portions of the action plan
- Train the next leader at the end of the CQI cycle
- Send an email to all team members notifying them of the day, time, and location when the next quarterly meeting is scheduled
- Send reminder of CQI meeting one week prior to scheduled meeting (including details such as date, time, location, agenda, and if applicable, conference call-in number)
- Maintain a current listing of team members including their contact information, such as phone numbers and addresses
- Bring the current team members' contact information list at each meeting in order to contact members if they are not present at the meeting

THE MEETINGS, AGENDA, AND FORMAT

At every level, CQI Teams will use the CQI Meeting Activity Log-Minutes for their agenda and for recording of the minutes. This will facilitate consistency of minutes across the state.

Each team meeting should have an agenda set in advance. This will assure the meetings are productive and task oriented. The agenda items listed below should always be considered yet may not be pertinent at every meeting. The Level 1 Teams should include as many of the following items that are relevant. At all levels the agenda is set and prioritized by the facilitator and scribe who seek input from team members as needed. It is important that the scribe and facilitator do not overload the agenda with too many issues for one meeting.

Agendas may include some or all of the following:

- Quarterly CQI newsletter
- Review of data regarding participant, stakeholder, and staff satisfaction
- Program evaluation—demographics, process and outcome measures and other issues
- Review and development of strategic plans including training needs
- Updates on CQI PDSA projects underway and proposals of new projects
- Past issues unresolved

For Level 2 and Level 3 CQI Teams, issues for the agenda will include unresolved issues passed up from a lower level team. Additionally, issues identified by participants and community partners may be a significant part of the agenda. Additional individuals may be invited to attend meetings to provide details on specific agenda items.

CQI Minutes: Format, Process of Recording, and Distribution

Recording of Minutes

Minutes shall be recorded using the CQI Meeting Activity Log-Minutes. It may be more practical to approve items continuously, especially if there was lengthy discussion on a particular agenda item. For example, the team may stop after completing several simple issues and approve the minutes

regarding those issues. The team may stop after a difficult or lengthy agenda item and read the minutes, amend as necessary, and approve them prior to moving on to the next item for consideration. During CQI meetings the previous minutes will be reviewed by the team. All members should determine if the recorded words accurately reflect the key points of each issue and plan for action. Finalized CQI minutes from all levels of the three-tier process are forwarded to the DHSS Home Visiting Program to be posted to the DHSS state web site accessible through a secure user-id and password for DHSS home visiting LIAs to access for review at any time.

Consensus

The goal is to agree on the disposition of each agenda item. This agreement should be reached by consensus through clear and thoughtful discussion and consideration. One feature of the consensus process is that when an individual finds that he/she is unable to agree with a decision that seems clear and appropriate to the group in general they may "stand aside" so that an action may be taken and the process may continue. The group members share a responsibility to listen to each agenda item. Generally this process is more unifying than taking an actual vote. It is recognized that there may be some issues when consensus cannot be reached. Depending on the issue, resolution may be tabled to allow more study of the issue or the issue may be referred to another level to request feedback.

The team may decide whether to have the scribe get a consensus in the last few minutes of the actual meeting, or to have the scribe type up the notes and send them out to team members electronically for consensus.

Distribution

The scribe forwards a copy the agenda and CQI Meeting Activity Log-Minutes to all team members. A copy is also sent to the scribe of the next level team so he/she can formulate the next level agenda. A copy of the minutes should be placed in the CQI notebook along with any supporting papers. The leader will also be responsible for bringing minutes back to the original group from the next level meeting and placing them in the CQI notebook.

The CQI Notebook

Each team should have a notebook maintained by the scribe that is available to team members at all meetings. The CQI notebook should include CQI Meeting Activity Log-Minutes, sign-in sheets, confidentiality statements, and documents related to meeting topics, such as handouts.

Confidentiality

Confidentiality can become an issue during the CQI process as sensitive information may be shared. In order to assure confidentiality of staff and families served, the scribe must refrain from recording specific names if they are discussed in a meeting. Team members shall also refrain from use of family names when community partners and consumers are present in a meeting. Information related to incidents, accidents, and grievances should be discussed in a manner that protects the confidentiality of all involved.

All team members, including community partners and participants, must sign a Confidentiality Statement prior to working with the CQI Teams (APPENDIX 3). This signed confidentiality statement will remain a part of the sign-in sheet to be used at each CQI meeting. These sign-in sheets should be kept on file in the CQI notebooks.

FOCUSING ON THE CQI PROCESS

A quarterly CQI newsletter will be issued by the DHSS Home Visiting Program staff during the first two weeks of each quarter. The newsletter will focus on one to two pertinent data areas identified by the DHSS Home Visiting Program to be addressed among all LIAs. The following flow chart illustrates how the CQI newsletter will be used to focus the CQI process:

Figure 4: CQI Process Flowchart
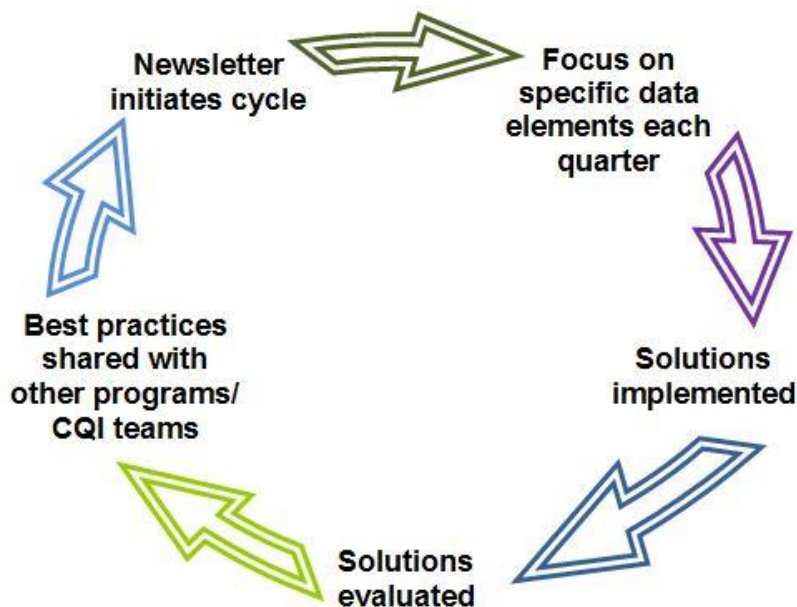
The CQI quarterly newsletter provides guidance for CQI Teams. While teams are encouraged to use the CQI Newsletter in their meetings, teams are not limited to discussing newsletter items only.

- <u>Any</u> service delivery issue is appropriate for discussion during CQI meetings, but aggregate data should drive the statewide focus on performance measures and outcomes to be examined through the CQI process.
- The CQI newsletter is the mechanism to focus the Level 1 CQI meetings on performance measures and outcomes statewide that have been identified as requiring attention at the local level. The CQI newsletter is disseminated approximately one week before Level 1 CQI meetings begin.
- Ongoing elements of the newsletter may include:

    o Quarterly article regarding performance measures and outcomes identified by the DHSS Home Visiting Program

- Action Alerts for improvement opportunities based on statewide aggregate performance measures and outcomes identified by the DHSS Home Visiting Program
- CQI calendar for the quarter
- Pertinent state and national awareness event information
- CQI successes and celebrations
- Statewide CQI meeting minutes link and summary of decisions made at previous quarter's Level 3 meeting
- Update on new issues for next quarter

- DHSS supported home visiting agencies will use the CQI Quarterly newsletter as a guide in Level 1 CQI meetings to focus teams on identified Action Alerts in relation to site specific quarterly performance measure and outcomes reports and monthly data quality reports.
- Local and state level solutions are developed and fed back into the next quarter's CQI newsletter.
- Solution development leads to improvement in participant and program outcomes in DHSS home visiting programs.

Plan-Do-Study-Act Process Utilizing S.M.A.R.T. Aims

Level 1 CQI Teams implement the Plan-Do-Study-Act (PDSA) process using S.M.A.R.T (Specific, Measurable, Attainable, Relevant, and Timely) Aims to address identified program or data issues. To assist LIAs in assessing their responses to the CQI Newsletter Action Alerts, site level quarterly performance measures and outcomes reports as well as monthly data quality reports are provided to LIAs. These reports provide direction for the Level 1 CQI Teams to develop PDSA projects that address the Action Alerts as they relate to the site's specific data.

Level 1 Teams are required to review and use their site specific data in their meetings to address the quarterly newsletter Action Alerts, but teams are not limited to discussing these items only. PDSA projects will be developed and recorded on the CQI storyboard (APPENDIX 4). Completed CQI storyboards will be submitted to the DHSS Home Visiting Program to be posted on the Missouri Home Visiting Gateway Webpage to be viewed and used as opportunities for learning about continuous quality improvement processes across all DHSS home visiting programs.

The following illustrates the PDSA cycle:

Aim Statement: A written and measurable description of what is to be accomplished.

Plan: What is the objective? How will data be collected to measure success?

Do: Implement the plan and collect the data.

Study: Analyze the data. Did the plan work? Are revisions needed?

Act: Re-evaluate plan and conduct cycle again, if needed.

Figure 5: Quality Improvement: Getting Started

Quality Improvement: Getting Started

Aim
What are we trying to accomplish?

Measure
How will we know if a change is an improvement?

Change
What changes can we make that will result in improvement?

Rapid cycle improvement

Act | Plan
Study | Do
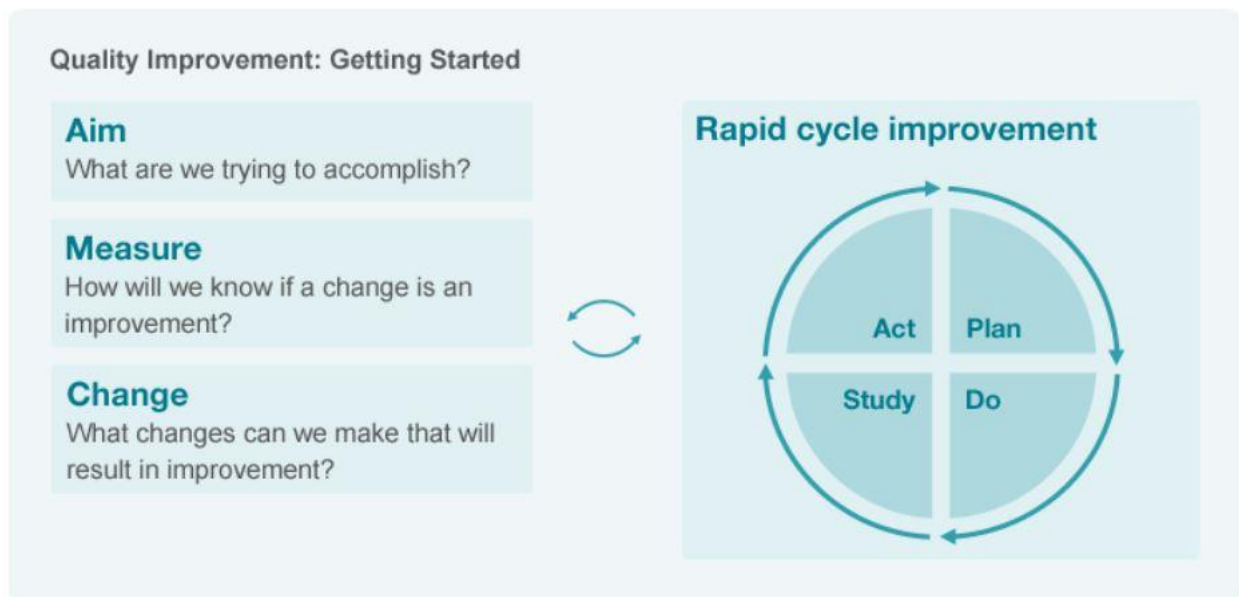
Information Sharing

The possibilities of learning from each other are great. The three-tier process of forwarding unresolved issues to the next level offers the ability to share across communities and statewide with stakeholders of varied expertise and resources to offer new and innovative ideas and solutions that could not come from a single-tier approach. The ideas, resources, and responses from every CQI Team level are reviewed at each subsequent team meeting through the previous quarter's CQI minutes. Additionally, home visiting agencies are given access to the secure portion of the Home Visiting section of the DHSS state website where the minutes of all level meetings are posted as well as the agendas of all meetings. LIAs are able to access these resources directly on the DHSS website using a secure user-id and password. Another resource for information sharing is through the Missouri Home Visiting Gateway webpage. The Gateway webpage has many CQI resources and also includes a quick link to the secure portion of the DHSS website.

FFY 2017 CQI Cycle Calendar

1st Quarter–Level 1

October 2016

Sun	Mon	Tues	Wed	Thur	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

1st Quarter–Level 2

November 2016

Sun	Mon	Tues	Wed	Thur	Fri	Sat
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

1st Quarter–Level 3

December 2016

Sun	Mon	Tues	Wed	Thur	Fri	Sat
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

2nd Quarter–Level 1

January 2017

Sun	Mon	Tues	Wed	Thur	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

2nd Quarter–Level 2

February 2017

Sun	Mon	Tues	Wed	Thur	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

2nd Quarter–Level 3

March 2017

Sun	Mon	Tues	Wed	Thur	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

3rd Quarter–Level 1

April 2017

Sun	Mon	Tues	Wed	Thur	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

3rd Quarter–Level 2

May 2017

Sun	Mon	Tues	Wed	Thur	Fri	Sat
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

3rd Quarter–Level 3

June 2017

Sun	Mon	Tues	Wed	Thur	Fri	Sat
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

4th Quarter–Level 1

July 2017

Sun	Mon	Tues	Wed	Thur	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

4th Quarter–Level 2

August 2017

Sun	Mon	Tues	Wed	Thur	Fri	Sat
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

4th Quarter–Level 3

September 2017

Sun	Mon	Tues	Wed	Thur	Fri	Sat
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

FFY 2018 CQI Cycle Calendar

1st Quarter—Level 1

October 2017

Sun	Mon	Tues	Wed	Thur	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

1st Quarter—Level 2

November 2017

Sun	Mon	Tues	Wed	Thur	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

1st Quarter—Level 3

December 2017

Sun	Mon	Tues	Wed	Thur	Fri	Sat
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	26	30
31						

2nd Quarter—Level 1

January 2018

Sun	Mon	Tues	Wed	Thur	Fri	Sat
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

2nd Quarter—Level 2

February 2018

Sun	Mon	Tues	Wed	Thur	Fri	Sat
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28			

2nd Quarter—Level 3

March 2018

Sun	Mon	Tues	Wed	Thur	Fri	Sat
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

3rd Quarter—Level 1

April 2018

Sun	Mon	Tues	Wed	Thur	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

3rd Quarter—Level 2

May 2018

Sun	Mon	Tues	Wed	Thur	Fri	Sat
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

3rd Quarter—Level 3

June 2018

Sun	Mon	Tues	Wed	Thur	Fri	Sat
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

4th Quarter—Level 1

July 2018

Sun	Mon	Tues	Wed	Thur	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

4th Quarter—Level 2

August 2018

Sun	Mon	Tues	Wed	Thur	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

4th Quarter—Level 3

September 2018

Sun	Mon	Tues	Wed	Thur	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

Missouri Home Visiting Continuous Quality Improvement (CQI)
Level # Team 20XX CQI Cycle – Xth Quarter Meeting Activity Log-Minutes
Month DD, YYYY
X:XX p.m. – X:XX p.m.
Building / Meeting Room Location

Members Present in Person	
Name, Job Title, Organization	Name, Job Title, Organization
Name, Job Title, Organization	Name, Job Title, Organization
Name, Job Title, Organization	Name, Job Title, Organization
Name, Job Title, Organization	Name, Job Title, Organization
Members Present by Phone	
Name, Job Title, Organization	Name, Job Title, Organization
Name, Job Title, Organization	Name, Job Title, Organization
Name, Job Title, Organization	Name, Job Title, Organization
Members Absent	
Name, Job Title, Organization	Name, Job Title, Organization
Name, Job Title, Organization	Name, Job Title, Organization

Agenda Topic	Issues/Concerns	Discussion
Sign-in and Introductions Review/approval of 20XX Quarter "X" Level 1 Meeting Minutes	Review of minutes	Introductions by everyone attending in person and by phone. *(Note any discussion or requests to update minutes)*
Old Business Old Business Topic 1	Brief Description of Old Business Topic 1	*(Note any discussion, actions needed, and who is responsible for activities related to Old Business Topic 1)*
Old Business Topic 2	Brief Description of Old Business Topic 2	*(Note any discussion, actions needed, and who is responsible for activities related to Old Business Topic 2)*
Old Business Topic 3	Brief Description of Old Business Topic 3	*(Note any discussion, actions needed, and who is responsible for activities related to Old Business Topic 3)*
New Business New Business Topic 1	Brief Description of New Business Topic 1	*(Note any discussion, actions needed, and who is responsible for activities related to New Business Topic 1)*
New Business Topic 2	Brief Description of New Business Topic 2	*(Note any discussion, actions needed, and who is responsible for activities related to New Business Topic 2)*
New Business Topic 3	Brief Description of New Business Topic 3	*(Note any discussion, actions needed, and who is responsible for activities related to New Business Topic 3)*
New Business Topic 4	Brief Description of New Business Topic 4	*(Note any discussion, actions needed, and who is responsible for activities related to New Business Topic 4)*

Agenda Topic	Issues/Concerns	Discussion
Plan Do Study Act (PDSA) Project Update CQI Project 1 Title PDSA Update CQI Project 2 Title PDSA Update	 Brief Description CQI Project 1 PDSA Brief Description CQI Project 2 PDSA	 *(Note any discussion, actions needed, and who is responsible for activities related to CQI Project 1 PDSA)* *(Note any discussion, actions needed, and who is responsible for activities related to CQI Project 2 PDSA)*
Next steps	Action items	*(Here list any actions that need to be taken, who is responsible, and when it will be done.)* • *Individual will complete XYZ activity by Month, DD, YYYY.* • *Individual A and Individual B will complete QRS activity and report back at the next meeting on MM,DD,YYYY.* • *(Continue with all action items)*
Confirm next meeting	Provide upcoming schedule	The next meeting is scheduled for Month, DD, YYYY from X:XX – X:XX p.m., at Building/Meeting Room, *(provide call-in number, if any). A calendar invitation will be emailed to everyone (or note how upcoming meetings will be announced.)*

Home Visiting Continuous Quality Improvement (CQI) Team Meeting

Location _____

Date _____

CONFIDENTIALITY STATEMENT:

In becoming a participant on one of the Continuous Quality Improvement Teams, I hereby agree to hold all information obtained in the course of this and future meetings in the strictest of confidence.

My signature implies that I respect the privacy of the participants in the DHSS Home Visiting program, the Missouri Department of Health and Senior Services, the DHSS Home Visiting program personnel, community partners, and stakeholders, and will not disclose any information regarding children or families discussed in the meetings.

Signature below constitutes understanding of the above information.

NAME and Position (Please Print)*	Agency	Email Address	Signature

CQI STORYBOARD TITLE:

Agency: Address:

Contact Person: Contact Email: Date Submitted:

1. AIM STATEMENT	2. PLAN	3. DO
Statement of what you are trying to accomplish (aim), how you will know if a change is an improvement (measurement), and what change will result in improvement (method). Define the start date, end date, and team leader.	Define the problem and expected outcomes. Identify potential causes and change solutions. Select change solution(s).	Develop action plan(s). Identify data measuring both the change and change results (process and outcome measures). Implement planned change and collect data.
4. STUDY	5. ACT	6. FUTURE CQI
Describe the plan in which the data will be collected and analyzed. Analyze both the change process and the results.	Recommend the next steps towards process improvement.	Define any future plans for process evaluation and/or areas for improvement. Include lessons learned throughout the process.

Revised 11/10/2016